

City

## Sons of Norway Foundation in Canada Activity/Event/Purchase Follow-Up Report

Prov.

PC

This report shall be completed by all organizations and individuals who have received a grant from Sons of Norway Foundation in Canada. Forward to the address below within **60 days** of completion of the event. **This report must be completed before future grant applications can be considered.** 

Name of organization or individual \_\_\_\_\_

Contact address \_\_\_\_\_

| Telephone            | Email  |   |
|----------------------|--|---|
| Grant received for   | · · · · · · · · · · · · · · · · · · ·            |   |
|                      |  |   |
| Number of particip   | oants  | Number of days of event   |
| Email of President   | : (if an organization)                           |   |
| Email of Secretary   | (if an organization)                             | · · · · · · · · · · · · · · · · · · ·   |
| -                    | along with your report,<br>parate word document. | interesting details of the activities pertaining to   |
| -                    | are submitting pictures                          | s for our web page, with this report, be sure to y the individuals.   |
| Financial report: ir | ncluding income and ex                           | penses.   |
| Income               | Amount   | Forward report to:  |
|                      |  | Sons of Norway Foundation in Canada<br>c/o Patty Schwartz, Secretary<br>3839 S. Morgan Crescent<br>Port Alberni, B.C. V9Y 6B7 |
|                      |  | Telephone – ((250) 723-5530   |
| Expenses             |  | Email – secretary@sonfic.ca   |
| ZAPONOGO             |  | A Follow Up Report must be  |
|                      |  | submitted before future grant applications will be considered.  |
|                      |  |   |
| Balance              |  |   |
| Date                 |  |   |